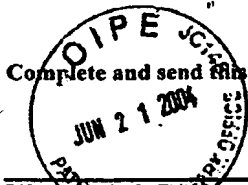


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PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
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23459 7590 03/19/2004

ARTHUR J. O'DEA
LEGAL DEPARTMENT
COGNEX CORPORATION
ONE VISION DRIVE
NATICK, MA 01760-2077

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Cheryl Sloane (Depositor's name)
Cheryl Sloane (Signature)
6/17/04 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/737,836	12/15/2000	Aaron S. Wallack	C00-066	9473

TITLE OF INVENTION: SYSTEM AND METHOD FOR REGISTERING PATTERNS TRANSFORMED IN SIX DEGREES OF FREEDOM USING MACHINE VISION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$0	\$1330	06/21/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
WERNER, BRIAN P	2621	382-151000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

William Loginov

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Cognex Corporation

Natick, MA

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

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☐ Publication Fee

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☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 03-2357 (enclose an extra copy of this form).

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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(Date)

6/17/2004

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06/23/2004 RMEBRAH1 00000080 032357 09737836

01 FC:1501

1330.00 DA

02 FC:8001

30.00 DA

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